

STAFF REPORT ACTION REQUIRED with Confidential Attachment

Toronto Public Health 2017 Operating Budget Request

Reason for Confidential Information:	Personal matters about an identifiable individual, including municipal or local board employees, and labour relations and employee negotiations.						
Wards:	All						
From:	Acting Medical Officer of Health						
To:	Board of Health Budget Committee						
Date:	October 18, 2016						

SUMMARY

This report outlines the Toronto Public Health (TPH) 2017 Operating Budget Submission for consideration by the Board of Health (BOH). The TPH 2017 Operating Budget Submission totals \$239,554.2 thousand gross/\$58,444.6 thousand net and is \$5,287.0 thousand gross and \$478.2 thousand net below the 2016 Operating Budget.

The net decrease of \$478.2 thousand from the 2016 Operating Budget includes base budget increases for salaries and benefits and non-payroll economic factors of \$1,099.3 thousand net; BOH Budget Committee recommended reduction options of \$587.0 thousand net; BOH Budget Committee recommended new & enhanced services of \$187.5 thousand net; New and Enhanced services for consideration by the BOH of \$85.1 thousand net; and other reduction options for consideration by the BOH of \$1,263.2 thousand net.

RECOMMENDATIONS

The Acting Medical Officer of Health recommends that:

- 1. The Board of Health request City Council approve the Toronto Public Health 2017 Operating Budget Request of \$242,104.4 thousand gross/\$59,622.6 thousand net as summarized in Table 3, "Overview of 2017 Operating Budget Submission";
- 2. The Board of Health request City Council approve the list of base budget adjustments as summarized in Table 3, "Overview of 2017 Operating Budget Submission" of this report totaling a decrease of \$1,682.8 thousand gross and an increase of \$1,099.3 thousand net;
- 3. The Board of Health request City Council approve the 2017 Reduction Options of \$1,803.9 thousand gross and \$587.0 thousand net which includes efficiency

savings of \$1,861.1 thousand gross and \$587.0 thousand net and revenue changes of \$57.2 thousand gross and zero net, as outlined in Attachment 2 – "Summary of Recommended Reduction Options" and Attachment 3 – "Summary of Recommended Confidential Reduction Options" to meet the City's 2.6 percent reduction target;

- 4. The Board of Health request City Council approve the 2017 New and Enhanced Requests of \$750.0 thousand gross and \$187.5 thousand net as outlined in Table 3, "Overview of 2017 Operating Budget Submission";
- 5. The Board of Health request City Council approve the 2017 recommended user fee changes for Toronto Public Health identified in Table 2, "Food Handler Certification Training User Fees"; for inclusion in the Municipal Code Chapter 441;
- 6. The Board of Health consider the 2017 Reduction Options of \$2,890.8 thousand gross and \$1,263.2 thousand net as outlined in Attachment 4 "Summary of Confidential Reduction Options to be Considered" to meet the City's 2.6 percent reduction target;
- 7. The Board of Health consider the 2017 New and Enhanced Requests of \$340.5 thousand gross and \$85.1 thousand net as outlined in Table 3, "Overview of 2017 Operating Budget Submission";
- 8. The Board of Health consider an increase of \$2,103.7 thousand gross and net for the Student Nutrition Program as outlined in Table 4, "Other New & Enhanced Services" and in the report, "Student Nutrition Program: 2017 Operating Budget Request and Program Update"; and
- 9. The Board of Health forward this report to the City's Budget Committee for its consideration during the 2017 budget process.

Financial Impact

The TPH 2017 Operating Budget Submission totals \$239,554.2 thousand gross/\$58,444.6 thousand net. This Submission is \$5,287.0 thousand gross and \$478.2 thousand net below the TPH 2016 Approved Operating Budget. The Submission is 0.8 percent below the TPH 2016 Operating Budget and does not achieve the budget reduction target of 2.6 percent as directed by City Council.

The net decrease of \$478.2 thousand from the 2016 Operating Budget includes base budget increases for the salaries and benefits, and the non-payroll economic factors of \$1,099.3 thousand net; Board of Health (BOH) Budget Committee recommended reduction options of \$587.0 thousand net; BOH Budget Committee recommended new & enhanced services of \$187.5 thousand net; New and Enhanced Services for consideration of \$85.1 thousand and other reduction options for consideration of \$1,263.2 thousand net.

The Deputy City Manager and Chief Financial Officer has reviewed this report and agrees with the financial impact information.

DECISION HISTORY

At its meeting of February 17, 2016, City Council approved a TPH 2016 Operating Budget of \$243,207.7 thousand gross / \$58,622.4 thousand net:

During 2016, in year adjustments were made to the 2016 Operating Budget as follows:

- 1. Adjustment to 100 percent provincially funded programs and technical adjustments for a reduction of \$179.0 thousand gross and \$0 net.
- 2. Increase in Salaries and Benefits due to the negotiated collective agreement for \$1,912.4 thousand gross and \$478.0 thousand net.
- 3. Decrease of \$100.0 thousand gross and \$177.6 thousand net to achieve budget reduction target assigned by the City Manager to meet City Council's direction http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2016.EX12.2

The TPH 2016 Operating Budget including in-year budget adjustments is \$244,841.2 thousand gross and \$58,922.8 thousand net.

On July 12, 2016, City Council directed an across the board budget reduction target of 2.6 percent net below the 2016 Approved Net Operating Budgets for all City Programs, Agencies, Toronto Community Housing Corporation, and Accountability Offices. http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2016.EX16.37

City Council at its meeting of July 12, 2016 requested TPH to include funding for a Community Health Officer (CHO) position in the 2017 Operating Budget Submission to support the Rockcliffe-Smythe Community. http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2016.CD13.1

At its meeting of July 14, 2016, the Board of Health Budget Committee directed the Medical Officer of Health to submit a 2017 Operating Budget request that:

- a. Includes the efficiencies identified in the presentation (July 14, 2016) from the Medical Officer of Health, and continues to explore opportunities to reduce costs through efficiencies which do not decrease the level of health services in Toronto;
- b. Maintains and enhances the level of service, and also identifies the impacts of a 2.6 percent reduction on the quality and quantity of public health services provided in Toronto;
- c. Includes the necessary funding for the following previously approved new and enhanced services: Year 3 of the Toronto Urban Health Fund and Year 5 of the Student Nutrition Program; and
- d. Identifies opportunities to reallocate savings in provincial 75 percent cost-shared funding to provincial cost-shared services which are not meeting the provincially mandated standards.

http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2016.HU6.1

At its meeting of September 26, 2016 the BOH Budget Committee considered a report, TPH 2017 Operating Budget Request, and made the following decisions:

- 1. Referred the report to the Acting Medical Officer of Health with the request that she, at a Board of Health Budget Committee meeting to be scheduled for October 2016, submit a 2017 Operating Budget Request for Toronto Public Health incorporating the following:
 - a. The following efficiencies identified in Attachment 2 to the report (September 12, 2016) from the Acting Medical Officer of Health:
 - Student Nutrition Inflation cost of food reduction
 - line by line non-payroll spending review
 - 311 Inter Divisional Charge value-based reduction
 - b. The following new and enhanced services:
 - Funding for Immunization to meet legislated standard adjusted for a two-year phase-in, in two equal parts
 - Toronto Urban Health Fund Year 3
 - c. Price changes to recover full costs in the Food Handler Certification Program
 - d. No reduction to the Vector Borne Disease Program nor the Student Nutrition Program
- 2. Requested the Acting Medical Officer of Health to report further to the October 2016 meeting on:
 - a. Food Safety and Safe Water Inspections
 - b. Rockcliffe-Smythe Community Health Officer
 - c. Student Nutrition Program Year 5
 - d. What has been done to date on obtaining corporate sponsorship and future plans for obtaining corporate sponsorship for the Student Nutrition Program
- 3. Confirmed its instructions in closed session requesting the Acting Medical Officer of Health to report further to the October 2016 meeting.

ISSUE BACKGROUND

On July 12, 2016 City Council directed a budget reduction target of 2.6 percent net below the 2016 Approved Net Operating Budgets for all City Programs, Agencies, Toronto Community Housing Corporation, and Accountability Offices.

This budget reduction target of 2.6 percent or \$1,532.0 thousand net for TPH is in addition to the reductions required to absorb \$1,099.3 thousand net or a 1.9 percent increase in the TPH base budget primarily for negotiated salaries and benefits.

Therefore, a total reduction of 4.5 percent from the TPH 2016 Approved Operating Budget would be required to achieve the City's reduction target.

Public health services include programs that receive provincial funding for 100 percent of the cost and those that receive provincial funding for 75 percent of the cost (cost-shared) which leverage \$3 of provincial funding for every \$1 of City investment in public health.

The statutory responsibilities, mandate and authority of the Toronto Board of Health (and through the Board, Toronto Public Health) are set out in the Ontario Health Protection and Promotion Act (HPPA). The program requirements and expectations of the Board of Health are set out in the Ontario Public Health Standards (OPHS), authorized under the HPPA.

The City's funding contribution to the TPH Operating Budget for cost-shared public health services and programs has declined by \$19.4 million since 2004 as the Province increased its share for cost-shared mandatory programs from 50 percent in 2004 to 75 percent in 2007.

In 2015, the Ontario Ministry of Health and Long Term Care implemented a new equity funding formula for the 36 public health units to address increasing population growth, growing health needs and local equity gaps for residents with higher needs. Toronto Public Health was identified by the Province as one of eight public health units in 2015 and one of ten public health units in 2016 that is under-funded.

In 2015 and 2016, the Province approved increases of 2.6 percent and 1.3 percent respectively in cost-shared funding for TPH. Since the City approved an increase of only 1.3 percent in 2015 and 0.6 percent in 2016 for its 25 percent share of the funding, the TPH base budget for mandatory public health services continues to be lower than required to fund the resources needed to address population growth, growing health needs and increasing equity gaps in the city.

For 2016, the surplus approved provincial funding for cost-shared mandatory core public health services is \$772.8 thousand which cannot be accepted. Only if the City provides its 25 percent share of the cost-shared funding, can TPH accept the full funding offered by the Province to close the gap in resources required to provide needed public health services.

COMMENTS

The TPH 2017 Recommended Operating Budget reflects the decisions made by the Board of Health Budget Committee at its meeting on September 26, 2016. The TPH 2017 Recommended Operating Budget totals \$242,104.4 thousand gross/\$59,622.6 thousand net that is \$699.8 thousand net or 1.2 percent above the 2016 Operating Budget and is summarized in Table 1a, TPH 2017 Operating Budget Recommended.

Further reductions to move towards the City's target as well as new and enhanced service options for the Board's consideration are included in the TPH 2017 Operating Budget Submission. The TPH 2017 Operating Budget Submission totals \$239,554.2 thousand gross/\$58,444.6 thousand net that is \$478.2 thousand net or 0.8 percent below the 2016

Operating Budget and is summarized in Table 1b, TPH 2017 Operating Budget for Consideration.

Table 1a								
Toronto Public Health								
2017 Operating Budget Recommended								
2017 Rec 2017 New & 2017								
		2017 Base	Reduction	Enhanced	Recommended	Change from 2016		
	2016 Budget	Adj.	Options	Services	Budget*	Budget		
(\$000s)	\$	\$	\$	\$	\$	\$	%	
GROSS EXP.	244,841.2	(1,682.8)	(1,803.9)	750.0	242,104.4	(2,736.7)	(1.1)	
REVENUE	185,918.4	(2,782.1)	(1,216.9)	562.5	182,481.8	(3,436.6)	(1.8)	
NET EXP.	58,922.8	1,099.3	(587.0)	187.5	59,622.6	699.8	1.2	
Positions	1,863.4	(13.4)	(11.6)	11.0	1,849.4	(14.0)	(0.8)	

^{*} endorsed by BOH BC September 26, 2016

Table 1b							
Toronto Public Health							
2017 Operating Budget For Consideration							
	2017	2017	2017 New &				
	Recommended	Reductions to	Enhanced to be	2017 Budget	Change from	om 2016	
	Budget	be Considered	Considered	Submission	Budget		
(\$000s)	\$	\$		\$	\$	%	
GROSS EXP.	242,104.4	(2,890.8)	340.5	239,554.2	(5,287.0)	(2.2)	
REVENUE	182,481.8	(1,627.7)	255.4	181,109.5	(4,808.8)	(2.6)	
NET EXP.	59,622.6	(1,263.2)	85.1	58,444.6	(478.2)	(0.8)	
Positions	1,849.4	(43.6)	7.5	1,813.3	(50.1)	(2.7)	

Budget Reduction Target

The City Manager issued guidelines and directions for development of the 2017 Operating Budget to all City Programs as well as Agencies, Boards and Commissions (ABCs). Included in these directions is the expectation that all City Programs and ABCs achieve the 2017 operating budget target of 2.6 percent below the Council Approved 2016 Net Operating Budget.

As directed by the City Manager in the 2017 Operating Budget directions and guidelines, TPH applied the following strategies to move towards Council's budget target of -2.6 percent:

- Continue to control expenditures through cost saving measures:
 - line by line review of previous three-year spending experience for further expenditure reductions
- Explore all services for efficiency savings including opportunities from business process reengineering, streamlining, transformation and innovation to service delivery from:
 - o cross divisional collaboration
 - o service delivery rationalization and restructuring
 - o opportunities for alternative service delivery
 - o changes to procedures where there may be dependencies

Maximize user fee revenue by reviewing full cost recovery where applicable, review
existing fines and permit fees and identify new fines and other user fees where
appropriate.

A total reduction of 4.5 percent from the TPH 2016 Operating Budget would be required to achieve the City's reduction target of 2.6 percent. In addition to the City's reduction target, a further 1.9 percent of reductions are required in order to absorb the base budget increase for negotiated salaries and benefits.

The TPH reduction options are summarized in Attachment 2 – Summary of Reduction Options; in Attachment 3 – Summary of Recommended Confidential Reduction Options; and in Attachment 4 – Summary of Confidential Reduction Options to be Considered.

Revenue Rate Change

In 2016, a detailed review was undertaken of the user fees charged for the Food Handler Certification Training program with the objective of setting the fees to recover the full cost of the service provided.

User fees associated with the Food Handler Certification Training are listed in the Municipal Code Chapter 441. All services for which TPH charges a fee directly benefit an individual and/or an organization and thus user fee rates are recommended to recover full costs and are subject to automatic inflationary increases each year.

Six services related to the Food Handler Certification program were reviewed. Based on the results of the cost recovery review applied to the user fees structure, the fee for the in class training component will not increase. User fees for the remaining five services are recommended to increase. The calculation of recommended user fees is based on all the costs associated with providing the services. The estimated overall increase in revenue from the recommended fee increase is \$57,200. This increase will recover the full cost of providing the Food Handler Training and related services.

Table 2 lists the user fees with recommended increases in the rates to achieve full cost recovery for providing the service.

Table 2							
Food Handler Certification Training User Fees							
		2017	2017				
Service	Fee Basis	Base Rate	Rec Fee				
1. In Class Training	Full Cost Recovery	44.52	44.52				
2. Examination, and issuing of food certificate	Full Cost Recovery	44.30	52.60				
Administration and material to reissue certificate	Full Cost Recovery	11.38	20.00				
4. TPH certificate for Accredited/Approved Food Handlers	Full Cost Recovery	5.68	20.00				
Cost of Material to produce the Food Handler Safety Manual	Full Cost Recovery	11.39	25.00				
6. Cost of Material to produce the Food Handler Safety Manual plus S&H	Full Cost Recovery	28.43	35.00				

Growing Public Health Needs

A significant portion (over 70 percent) of the TPH 2017 Operating Budget Submission is for provincial public health mandatory cost-shared (75:25) services. This amount of \$171,114.3 thousand gross/\$42,778.6 thousand net expenditures includes both the provincial share of 75 percent and the City's net share of 25 percent.

For every \$1 that the City invests in provincial mandatory cost-shared public health services, the Province invests \$3. While this allows TPH to leverage \$1 of city investments in cost-shared programs into \$4 of public health service, this also means that any \$1 reduction in city funding for these cost-shared core public health services results in a total reduction of \$4 in services due to the related loss of \$3 in provincial funding. Therefore, reducing cost-shared public health services to meet the City's target of -2.6 percent has a significant detrimental impact on public health service in Toronto.

In 2015, the Ontario Ministry of Health and Long Term Care implemented a new equity funding formula for the 36 public health units in the province to address increasing population growth, growing health needs and local equity gaps for residents with higher needs. Toronto Public Health was identified by the Province as one of eight public health units in 2015 and one of ten public health units in 2016 that is under-funded.

In 2015 and 2016, the Province approved increases of 2.6 percent and 1.3 percent respectively in cost-shared funding for TPH. Since the City approved an increase of only 1.3 percent in 2015 and 0.6 percent in 2016 for its 25 percent share of the funding, the TPH base budget for mandatory public health services continues to be lower than required to fund the resources needed to address population growth, growing health needs and increasing equity gaps in the city.

For 2016, a surplus of approved provincial funding which cannot be accepted by TPH and the City is \$772.8 thousand. Only if the City provides its 25 percent share of cost shared funding, can TPH accept the full incremental funding approved by the Province to close the gap in resources required for Toronto to provide needed public health services.

New and Enhanced Services

The 2017 budget submission includes four options for new & enhanced cost shared services. The following two new and enhanced options were recommended by the BOH Budget Committee at its meeting on September 26, 2016:

Immunization to Meet Legislated Standard – \$600.0 thousand gross and \$150.0 thousand net and 11.0 positions with annualized impact in 2018 of \$421.8 thousand gross and \$105.4 thousand net.

In order to meet the new and existing requirements of the Immunization of School Pupils Act (ISPA), a total of 15 new positions is required. The Board of Health Budget Committee at its meeting on September 26, 2016 requested the funding request for delivery of the Immunization School Assessment Program be adjusted to meet the legislated standard over a two-year phase-in period. During the 2018 Operating Budget process, TPH will include a request for an additional 4.0 positions with funding of \$178.2 thousand gross and \$44.6 thousand net with an annualized impact in 2019 of \$123.0 thousand gross and \$30.7 thousand net.

This funding is required to meet the requirements of the ISPA and to be in compliance with the OPHS. Public health units are required to annually assess and maintain records of the immunization status of every student attending school under the ISPA. They must be immunized or have valid exemption against nine vaccines (meningococcal, varicella, pertussis, measles, mumps, rubella, diphtheria, tetanus and polio). Currently TPH annually reviews immunization records for one age cohort (7 or 17 year olds) of school children in publicly funded schools for the required vaccines, working with families to bring these students' immunizations up-to-date.

When fully implemented, TPH will work with an additional 90,000 families of students in public schools and 12,000 families of students in private schools to fully implement the ISPA with this additional funding.

Further information is provided in the report, "Protecting Toronto's School Children through Immunization".

Toronto Urban Health Fund (TUHF) - Year 3 – \$150.0 thousand gross and \$37.5 thousand net.

This proposal has been previously approved by Council for phased implementation over five years, 2015 to 2019. It addresses the increasing rates of HIV/STI and high risk sexual and substance misuse behaviours among vulnerable youth living in underserved regions of the City, specifically targeting Indigenous populations and those residing in Neighbourhood Improvement Areas. The enhancement will strengthen the youth sector's response in building individual and community capacity and resiliency among youth.

The following two new and enhanced options are for further consideration by the BOH:

Food Safety and Safe Water Inspections – \$316.6 thousand gross and \$79.2 thousand net and 6.5 positions with annualized impact in 2018 of \$218.7 gross and \$54.7 thousand net.

This enhancement will help the Food Safety and Safe Water Programs to achieve provincially prescribed service levels in these core public health programs. Current inspection levels do not meet the minimum requirements of the OPHS and the protocols for Food Safety and Recreational Water Safety. There are several factors that impact TPH's ability to meet these requirements: increasing number of higher risk category food premises, an increase in the number of special events, an increase in food safety complaints, and increasing number of animal to human exposure reports.

Further information is provided in the report, "Reinvesting in Food Safety and Safe Water Inspections".

Rockcliffe-Smythe Community Health Officer (CHO) – \$23.9 thousand gross and \$6.0 thousand net and 1.0 position with annualized impact in 2018 of \$70.0 thousand gross and \$17.5 thousand net.

City Council at its meeting of July 12, 2016 requested TPH to include funding for a Community Health Officer (CHO) to support the Rockcliffe-Smythe Community in the 2017 Operating Budget Submission.

While the request for one FTE is included in the 2017 operating budget request, TPH currently provides a community health officer to the Rockcliffe-Smythe community. The focus of their work, in part, is on identifying community issues related to the 731 Runnymede Road shelter and reducing health inequities through community engagement, assessment and development. Additional demands for support from CHOs within the community can be managed within the current staff complement.

Further information is provided in the report, "Community Health Officer Services in the Rockcliffe-Smythe Community".

Table 3 categorizes the changes included in the TPH 2017 Operating Budget Submission in accordance with the City's budget guidelines.

Table 3

Table 3							
Overview of the 2017 Operating Budget Submission							
	Summary of 2017 Operating Submission						
	Approved Positions	Gross Expenditures	Revenues	Net	Net	Cumulative Net	
(\$000s)		\$	\$	\$	%	%	
2016 Council Appr. Operating Budget as at February 17, 2016	1,872.0	243,207.7	184,585.3	58,622.4			
City Budget Reduction	0.0	(100.0)	77.6	(177.6)			
In-year approvals and technical adjustments	(8.6)	1,733.4	1,255.4	478.0			
2016 Operating Budget	1,863.4	244,841.2	185,918.4	58,922.8			
Step, Progression Pay, COLA, Benefits Gapping	0.0	4,615.3	3,498.0	1,117.3	1.90	1.90	
Salaries & Benefits Related to Capital Projects	(8.6)	(1,036.7)	(1,036.7)	0.0	0.00	1.90	
Operating Impact of Capital Projects	3.0	0.0	0.0	0.0	0.00	1.90	
Economic Factors - Non Payroll	0.0	362.0	45.9	316.0	0.54	2.43	
IDC / IDR	(1.9)	(1,233.6)	(1,234.6)	1.1	0.00	2.43	
Annualization, Reversal of 1 Time Requests & 100% Funded	, ,	, , ,					
Budget Adjustments	(5.9)	(4,380.5)	(4,007.1)	(373.4)	-0.63	1.80	
User Fees	0.0	0.0	1.4	(1.4)	-0.00	1.80	
Revenue Adjustment	0.0	(9.3)	(49.0)	39.7	0.07	1.87	
PART 1: 2017 Base Budget Request	1,850.0	243,158.3	183,136.2	60,022.1	1.87	1.87	
Over (Under) 2016 Operating Budget	(13.4)	(1,682.8)	(2,782.1)	1,099.3	1.87	1.87	
% Over (Under) 2016 Operating Budget	(0.7)	(0.7)	(1.5)	1.9	1.87	1.87	
Efficiency Reductions	(11.6)	(1,861.1)	(1,274.1)	(587.0)	-1.00	0.87	
Revenue Change	0.0	57.2	57.2	0.0	0.00	0.87	
2017 Reductions Recommended	(11.6)	(1,803.9)	(1,216.9)	(587.0)	-1.00	0.87	
PART 2: 2017 Recommended Budget Including Reduction Options	1,838.4	241,354.4	181,919.3	59,435.1	0.87	0.87	
Toronto Urban Health Fund - Year 3	0.0	150.0	112.5	37.5	0.06	0.93	
Immunization to Meet Legislated Standards	11.0	600.0	450.0	150.0	0.25	1.19	
Sub-Total 2017 Recommended New & Enhanced Total	11.0	750.0	562.5	187.5	0.31	1.18	
PART 3: 2017 Recommended Operating Budget	1,849.4	242,104.4	182,481.8	59,622.6	1.18	1.18	
Over (Under) 2016 Operating Budget	(14.0)	(2,736.7)	(3,436.6)	699.8	1.18	1.18	
% Over (Under) 2016 Operating Budget	(0.8)	(1.1)	(1.8)	1.2	1.18	1.18	
Efficiency Reductions	(26.6)	(1,445.7)	(1,084.3)	(361.4)	-0.61	0.56	
Minor Service Reductions	(3.0)	(227.6)	(170.7)	(56.9)	-0.10	0.47	
Major Service Reductions	(14.0)	(1,217.6)	(372.7)	(844.9)	-1.43	-0.97	
2017 Reduction Options to be Considered	(43.6)	(2,890.8)	(1,627.7)	(1,263.2)	-2.14	-0.97	
PART 4: 2017 Submission Including Reduction Options to be Considered	1,805.8	239,213.6	180,854.1	58,359.5	-0.97	-0.97	
Over (Under) 2016 Operating Budget	(57.6)	(5,627.6)	(5,064.2)	(563.3)	-0.97	-0.97	
% Over (Under) 2016 Operating Budget	(3.1)	(2.3)	(2.7)	(1.0)	-0.97	-0.97	
Food Safety and Health Hazard Inspections	6.5	316.6	237.5	79.2	0.13	-0.84	
Rockcliffe-Smythe Community Health Officer	1.0	23.9	17.9	6.0	0.03	-0.81	
2017 New & Enhanced to be Considered	7.5	340.5	255.4	85.1	0.15	-0.81	
PART 5: 2017 Submission Including New & Enhanced and Reduction Options to be Considered	1,813.3	239,554.2	181,109.5	58,444.6	-0.81	-0.81	
Over (Under) 2016 Operating Budget	(50.1)	(5,287.0)	(4,808.8)	(478.2)	-0.81	-0.81	
% Over (Under) 2016 Operating Budget	(2.7)	-2.16	-2.59	-0.81	-0.81	-0.81	
J. I. (Jinder) Zoro operaning Budget	(2.7)	2.10	2.07	0.01	0.01	0.01	

Other New and Enhanced Services: Municipal Funding Plan for Student Nutrition Program

Student Nutrition Program – Year 5: \$2,103.7 thousand gross and net:

Toronto Public Health manages the Student Nutrition Program (SNP) on behalf of City Council. This program does not fall within the provincial standards for service delivery through a public health unit.

City Council at its meeting of July 11-13, 2012 requested the Medical Officer of Health to report to the Board of Health, as part of the 2013 budget process, on a plan to increase the City's investment in a SNP funding partnership model with a view to fully phase-in the municipal share of the program within a three to five year horizon and to consider as part of the annual operating budget process, an annual increase to the City's investment in SNPs equal to the annual amount of food inflation reported by the Nutritious Food Basket survey.

The report, "Student Nutrition Program: 2017 Operating Budget Submission and Program Update" includes requests for program stabilization and service enhancements in line with year five of the six-year plan. The report requests the Board of Health to endorse:

- 1) The request for an additional net increase of \$1,145,313 to the Toronto Public Health 2017 Operating Budget to be allocated to existing student nutrition programs to increase the City's investment rate to 18 percent of total program costs, providing a stronger funding base for existing programs.
- 2) The request for an additional net increase of \$958,407 to the Toronto Public Health 2017 Operating Budget to extend municipal funding to 48 student nutrition programs in publically funded schools which currently do not receive municipal funding.

Table 4 summarized the requests for program stabilization and service enhancements for the Student Nutrition Program.

Table 4

Other New & Enhanced Services							
	Approved Positions	Gross Expenditures	Revenues	Net			
(\$000s)		\$	\$	\$			
SNP Increase Financial Stability of Currently Funded Programs	0.00	1,145.3	0.00	1,145.3			
SNP Increase - Expand to 48 New Schools	0.00	958.4	0.00	958.4			
Total Student Nutrition Program	0.00	2,103.7	0.0	2,103.7			
Total Other New & Enhanced Services	0.00	2,103.7	0.0	2,103.7			

Further details of the TPH 2017 Operating Budget Submission are included in the Attachments to this report and in the related, complementary reports.

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SIGNATURE

Dr. Barbara Yaffe Acting Medical Officer of Health

ATTACHMENTS

Attachment 1: Toronto Public Health 2017 Operating Budget Submission

Attachment 2: Summary of Recommended Reduction Options

Attachment 3: Summary of Recommended Confidential Reduction Options
Attachment 4: Summary of Confidential Reduction Options to be Considered